

01

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	NK	12/989	3/8/01
RESPONSE FORMALITY REVIEW			

09774607

INDEX OF CLAIMS

..... Rejected N Non-elected
 Allowed I Interference
 (Through numeral)... Canceled A Appeal
 Restricted O Objected

Claim	Final	Original	Date
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If more than 150 claims or 10 actions
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H.S.
3-12-01

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